

# BRUNSWICK COUNTY PARKS AND RECREATION

## ADULT CO-REC. KICKBALL LEAGUE REGISTRATION FORM

TEAM NAME: \_\_\_\_\_

TEAM MANAGER: \_\_\_\_\_ DAY PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

OTHER CONTACT: \_\_\_\_\_ DAY PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

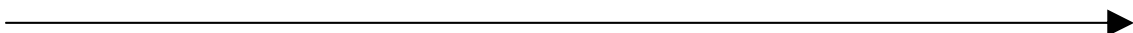
Have fun with your team name!

Please provide any additional comments you may have.

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ALL PLAYERS MUST SIGN THE ROSTER. ROSTER CHANGES MAY ONLY BE MADE DURING THE FIRST TWO WEEKS OF LEAGUE PLAY. IF CHANGES ARE MADE, PLEASE INFORM THE PARK AND RECREATION DEPARTMENT AT (910) 253-2676.



## ADULT CO-REC. KICKBALL LEAGUE - ROSTER/WAIVER

**Managers Name:** \_\_\_\_\_

**Players' Signature**

[illegible]